## Rev 06/2006

## LOBBYIST MONTHLY REPORT FORM



## State of Idaho

Ben Ysursa Secretary of State

To Be Filed By

L-3

LOBBYISTS (Sec. 67-6619)

of Page(s) Page THIS SPACE FOR OFFICE USE ONLY

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STATE OF IDAHO

(Type or print clearly in black ink) See instructions at bottom of page Period covered Lobbyist's name and permanent business address Date prepared Brianne Bowler 11473 W. Olympus Ct. Boise, 1D 83713 month ending 4-15-07 (Day) (Mo.) (Yr) Item Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer. Proportionate amounts contributed by each employer (Identify employers, under Category of Expenditure \* Total Amount for Item 3, at bottom of page.) Reimbursed Personal Living and Travel All Employers Expenses Pertaining to Lobbying Activity Employer No 4 Do Not Have to be Reported Employer No 1 Employer No 2 Employer No 3 Entertainment Food and Refreshment Living Accommodations Advertising Travel Telephone Other Expenses or Services Total \*When the number of employers you are reporting for requires multiple L-2 forms to be filed a total amount for all employers should be entered on Page 1 The totals of each expenditure of more than fifty dollars (\$50) for a legislator, other holder of public office, and executive officials. Item 2 Names of Legislators, Public and Executive Officials in Group Amount Continued on attached page(s) Employer(s) Name(s) and Address(es) INSTRUCTIONS Idahoans for Excellence in Education Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month TO BE FILED WITH: Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080 No. 4 Phone: (208) 334-2852 Fax: (208) 334-2282

Item 4		personal property to any Legislator, Public or Executive O		mployer in the nature of contributions of money or other tangible or intangible flicial or for or on behalf of any Legislator, Public or Executive Official.					
	Date		Amount	Nar	Name of Legislator, Public or Executive Official Receiving or Benefiting				
	Subject	eti maller	of monsed legislat	ion, the number of the Senate	<u> </u>	LEGISLATIVE SUE		IDENTIFICATION	
Item 5	or H	ouse Bill,	Resolution or other	legislative activity in which					
Subject (from )	('nde table)	Bill, Re	ras supporting or operation of Other twe Ident Number	legislative activity in which oposing  Appropriation Bill Number and Section Number	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns voting, political parties Equal rights, civil rights, minority affairs Covernment, financing, taxation, revenue, bidget, appropriations, bids, tees, funds Government, county Covernment, lederal Government, municipal	20 21 22 23 24 25 26 27 28 29 30 31	Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public passistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)	
Item Identify any rule, ratemaking decision, procurement, contract, old or bid process, financial services or bond lobbyist was supporting or opposing					CERTIFICATION I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code.  Private Privat				